Casesender: completel His section VB Do	DOUCOMPLETES HIS SECTION ON DELIVERY Page 1 of 1
Complete items 1, 2, and 3.	A. Signature
Print your name and address on the reverse so that we can return the card to you.	☐ Agent ☐ Addressee
Attach this card to the back of the mailpiece, or on the front if space permits.	B. Received by (Printed Name) C.) Date of Delivery
1. Article Addressed to:	D. Is defivery address different from Item 1? Yes If YES, enter delivery address below: No
Kenneth Parreno NNETH PARRENO	Certified Wail
xican Amer. Legal Defense & ducation Fund	RECEIVED
0 Broadway #300 n Antono, TX 78205	DEC 1.6 2021 ☐ Priority Mail Express® ☐ Registered Mail™
!1-CV-259-DCG, DOCs 70,75,&77	SLERK, U.S. Dicted Privancour Return Receipt for
2. Article Number (Transfer from service label)	Collect on Denvery Hasticle Deliver A Signature Confirmation M
7020 1810 0001 9928 0053	Insured Mall Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt